Foster Family Home - Corrective Action Report

Provider ID:

1-100106

Home Name:

Helen Claveria, NA

Review ID:

1-100106-7

94-1261 Huakai Street

Reviewer:

Lisa Johnson

Waipahu

HI 96797

Begin Date:

3/25/2019

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) Home inspection for a 2 person CCFFH recertification made on 3/25/19.
Home is in compliance with all requirements. Home will receive a 2 year certification.

Compliance Manager

Helin Claveria

Primary Care Giver

Date

03.25.19

Date